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# FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# OMB Number: 3235-0076 Expires: July 31, 2008 Estimated average burden hours per response: 16.00



FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix		Serial					
	1	<u> </u>					
	DATE F	RECEIVED	_				
•	{	<u> </u>					

Name of Offering ( check if this is an amendment and name has changed, and indicate changed	
Brazil Real Estate Opportunities Fund I - VG Coinvest, L.P.: Limited Patnership Int	erests erests
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506	Section 4(6) ULOE Mail Processing
Type of Filing: ☑ New Filing □ Amendment	Mall Flocesons
A. BASIC IDENTIFICATION DAT	
Enter the information requested about the issuer	AUG O 6 COUD
Name of Issuer ( check if this is an amendment and name has changed, and indicate changed	ge.)
Brazil Real Estate Opportunities Fund I - VG Coinvest, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
c/o Vision Brazil Gestão de Investimentos e Participações Ltda.,	(55) (11) 3817-1600
Rua Hungria, 514, 9th Floor, São Paulo, SP 01455-000 Brazil	
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Priof Description of Duri	PROCESSED PROCESSED
Brief Description of Business	· ( )
To operate as a private investment fund.	<b>AUG 1 3 2008</b>
Type of Business Organization	TION 100N DELITEDO
☐ corporation ☐ limited partnership, already formed	othe THOMSON REUTERS
□ business trust □ limited partnership, to be formed	
MonthYea	r
Actual or Estimated Date of Incorporation or Organization: 0 7 0 8	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbr	eviation for
State: CN for Canada; FN for other foreig	<del></del>
State. Civilor Carladat, 114 for Other Foreig	

### GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### A. BASIC IDENTIFICATION DATA

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
* Each promoter of the issuer, if the issuer has been organized within the past five years:										
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> </ul>										
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
Each general and managing partner of partnership issuers.										
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner										
Full Name (Last name first, :f individual)										
Brazil Real Estate Partners GP, Ltd.										
Business or Residence Address (Number and Street, City, State, Zip Code)  Rua Hungria, 514, 9th Floor, São Paulo, SP 01455-000, Brazil										
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner										
Full Name (Last name first, 'f individual)  Cayuga Lake Fund, L.P.										
Business or Residence Address (Number and Street, City, State, Zip Code) c/o The Townsend Group, 1660 West Second Street, Suite 450, Cleveland, Ohio 44113										
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner										
Full Name (Last name first, if individual)										
Strategic Equity – Real Estate Series A Limited										
Business or Residence Address (Number and Street, City, State, Zip Code)  Charter Place, 3 <sup>rd</sup> Floor, 23-27 Seaton Place, St. Helier, Jersey JE4 0WH										
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director* ☐ General and/or of the General Partner Managing Partner										
Full Name (Last name first, if individual) Abbud, Rodrigo										
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Vision Brazil Gestão de Investimentos e Participações Ltda., Rua Hungria, 514, 9th Floor, São Paulo, SP 01455-00 Brazil										
Check Box(cs) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or of the General Partner Managing Partner										
Full Name (Last name first, if individual) Wainer, Kenneth										
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Vision Brazil Gestão de Investimentos e Participações Ltda., Rua Hungria, 514, 9th Floor, São Paulo, SP 01455-00 Brazil										
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or of the General Partner Managing Partner										
Full Name (Last name first, if individual)  Junior, Amaury Fonseca										
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Vision Brazil Gestão de Investimentos e Participações Ltda., Rua Hungria, 514, 9th Floor, São Paulo, SP 01455-00 Brazil										
Check Box(es) that Apply:   Promoter Beneficial Owner Executive Officer Director* General and/or of the General Partner Managing Partner										
Full Name (Last name first, if individual)  Greco, Fabio										
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Vision Brazil Gestão de Investimentos e Participações Ltda., Rua Hungria, 514, 9th Floor, São Paulo, SP 01455-00 Brazil										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director* General and/or of the General Partner Managing Partner										
Full Name (Last name first, if individual) Freedman, Alan										

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Moore Capital Management, LLC, Floor 53, 1251 Avenue of the Americas, New York, NY, 10020

	·			B. INI	FORMAT	ION ABO	UT OFFE	ERING				
1 11 41											· Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								•••••		Ø		
2 What is	the minimur	n invesiment			• •		2, 11 ming u	inder OLOI	·•			
<ul> <li>What is the minimum investment that will be accepted from any individual?</li> <li>*The General Partner may accept capital commitments in its sole discretion.</li> </ul>								\$	*			
										Yes	No	
<ol> <li>Does the offering permit joint ownership of a single unit?</li> <li>Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any</li> </ol>										₩		
commi If a per or state	ssion or sin rson to be li es, list the n er or dealer,	nilar remuno sted is an as ame of the	eration for s ssociated pe broker or de	olicitation rson or age aler. If mo	of purchase nt of a brok ore than five	rs in connect er or dealer (5) person	registered to be lister	ales of secu- with the SE	rities in the Cand/or wi	offering. th a state		
Full Name	(Last name	first, if ind	ividual)				_					
NONE												
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
<del></del>										_		
Name of A	Associated E	Broker or De	ealer									
	Vhich Perso									_	cm:	
	All States"			,								All States
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[MT]	[NE]	[VV]	[NH]	[N]]	(NM)	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	(PA)
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	lividual)							_		
					<del></del>							
Business c	r Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
Nome of A	Associated E	Deales as D	-1									
name of F	vssociated E	втокег эг Де	eater									
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
	All States"							•••••			🗆 AI	I States
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(IL)	[IN]		[KS]		[LA]		[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
.[MT] [RI]	[NE] [SC]	[NV] [SD]	(NH) [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	(Last name			[17]	[01]	[VI]	[47]	[1171]	[** *]	[,,,]	[]	[1]
			,									
Business of	or Residence	Address (1	Number and	Street, Cit	y, State, Zip	Code)				_		<del></del>
Name of A	Associated F	Broker or De	ealer						<u> </u>			
	Which Perso							************	*************			All States
[AL]	[AK]	[A2]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA.]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	(TN)	[TX]	$\Pi \Pi \Pi$	(VT)	[VA]	[WA]	fWV1	[WI]	[WY]	[PR]

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \Pi \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$_	0	_	<b>s</b> _	0
	Equity	\$	0		\$_	0
	☐ Common ☐ Preferred	_		_		
	Convertible Securities (including warrants)	s _	0	_	<b>\$</b> _	0
	Partnership Interests	\$_	22,500,000	_	<b>S</b>	22,500,000
	Other (Specify)	\$	0		<b>S</b>	0
	Total	\$	22,500,000		\$	22,500,000
	Answer also in Appendix, Column 3, if filing under ULOE.			_	_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors			Aggregate Dollar Amount of Purchases
	Accredited Investors	_	1	_	\$_	22,500,000
	Non-accredited Investors		N/A	_	\$	N/A
	Total (for filings under Rule 504 only)		N/A		\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.	-		_	_	
3.	If this filing is for an effering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.					
	Type of offering		Type of Security			Dollar Amount Sold
	Rule 505		N/A		\$	N/A
	Regulation A	-	N/A	_	\$	N/A
	Rule 504	-	N/A	_	s -	N/A
	Total	•	N/A	_	s _	N/A
t t	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			כ	<b>s</b> _	0
	Printing and Engraving Costs			ב	<b>\$</b> _	0
	Legal Fees		6	đ	\$_	25,000
	Accounting Fees		[	ב	\$_	0
	Engineering Fees		C	כ	s _	0
	Sales Commissions (specify finders' fees separately)			כ	<b>\$</b> _	0
	Other Expenses (identify) legal and miscellaneous		Γ	כ	\$_	0
	Total			ZĪ	\$	25,000
					_	

<del></del>							
C. OFFERING PRIC	E, NUMBER OF INVESTORS, EXP	ENS	ES A	AND USE OF P	ROCE	<u>EDS</u>	
<ul> <li>Question 1 and total expenses furnis</li> </ul>	gregate offering price given in response to shed in response to Part C - Question 4.a. ds to the issuer."	a. Thi	nis		\$		22 475 BDG
					<b>-</b>		22,475,000
to be used for each of the purposes sho furnish an estimate and check the bo	sted gross proceeds to the issuer used or propose. If the amount for any purpose is not keep to the left of the estimate. The total d gross proceeds to the issuer set forth in respectively.	known of th	n, he				
				Payments to Officers, Directors, & Affiliates			Payments To Others
			\$_	0	_ 🗆	\$_	0
Purchase of real estate			\$_	0	_ 0	<b>\$</b> _	0
Purchase, rental or leasing and installati	ion of machinery and equipment		\$_	0	_ 🗆	\$_	0
Construction or leasing of plant buildin	gs and facilities		\$_	0		\$_	0
Acquisition of other businesses (include this offering that may be used in examother issuer pursuant to a merger)	ling the value of securities involved in change for the assets or securities of		\$	0		\$	0
Repayment of indebtedness			_	0 _		\$_	0
				0		\$_	0
Other (specify): Investment capital			\$_	0	_ Ø	\$ _	22,475,000
Column Totals			\$_	0	_ Ø	\$ _	22,475,000
Total Payments Listed (column totals as	dded)	**********		Ø \$	22,47	75,000	<u>0</u>
	D. FEDERAL SIGNATUI	RE	_				
following signature constitutes an undertal	b be signed by the undersigned duly author king by the issuer to furnish to the U.S. Secussuer to any non-accredited investor pursual	curities	s and	Exchange Commis	ission, u	unde pon w	er Rule 505, the vritten request of
Issuer (Print or Type) Brazil Real Estate Opportunities Fund I - VG Coinvest, L.P.	Signature A			Date July <u>23</u> , 2008			
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
Kenneth Wainer	Director of the General Partner						

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).